



PATIENT PRESENTING CLINICAL SIGNS

Dior Loma DKA new diagnosis lethargy

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.

BREED

Yorkie

SEX

Spayed Female

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. No evidence of overt pyelonephritis. The left kidney measured 4.2 cm. The right kidney measured 4.7 cm.

AGE

9 Years

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

WEIGHT

12.2 Pounds

The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.55 cm at the cranial pole and 0.65 cm at the caudal pole. The right adrenal gland measured 0.62 cm at the cranial pole and 0.71 cm at the caudal pole.

Spleen

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)

The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.

IMAGING PERFORMED BY

Jenn

Liver

HOSPITAL NAME

Rockaway AH

The liver was mildly enlarged. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non distended in size with mild, echogenic, nonmineralized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.

REFERRING VET

Dr. Maniar

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material. Gastric body wall measured 0.34 cm.

INVOICE

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The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material. Duodenum wall measured 0.36 cm.

DATE

10/27/21

Normal visible colon wall layers were present with apparent formed feces in lumen.



PATIENT

Pancreas

Dior Loma

The pancreas was normal in size and contour with heterogeneous to subtly hypoechoic parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

SPECIES

Canine

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AGE

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WEIGHT

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ULTRASONOGRAPHIC FINDINGS

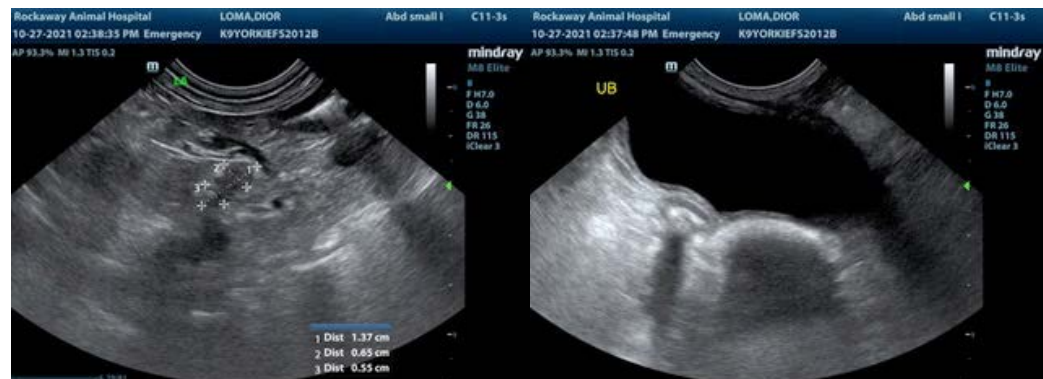
- Mild hepatomegaly with parenchymal remodeling – subjectively benign, metabolic/reactive/vacuolar hepatopathy, potential for concurrent inflammatory hepatopathy (i.e., cholangiohepatitis).
- Heterogeneous to subtly hypoechoic pancreas – potential for low-grade to chronic pancreatitis possible.
- Age related mild kidneys, no overt pyelonephritis
- Potential gastritis/gastroenteritis

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Urine culture and sensitivity on sterile urine sample recommended if not done. Hospitalization with stabilization of blood glucose levels and as-needed gastrointestinal support would be appropriate. Correlation with CBC/Chem panel and urinalysis suggested. Potential for low-grade to chronic pancreatitis would be suspected if evidence of cranial abdominal or subxiphoid discomfort on palpation, or elevated spec cPL.

For an additional charge, internal medicine consult can be utilized through SonoPath.com. You can select the internal medicine drop down at <http://spa.sonopath.com/>.

One of the world's top internists & SonoPath associate Dr. Remo Lobetti BVSc, MMedVet, PhD, DECVIM can evaluate your case through SonoPath. <https://sonopath.com/resources/sonopath-services/internal-medicine-teleconsultation-services>





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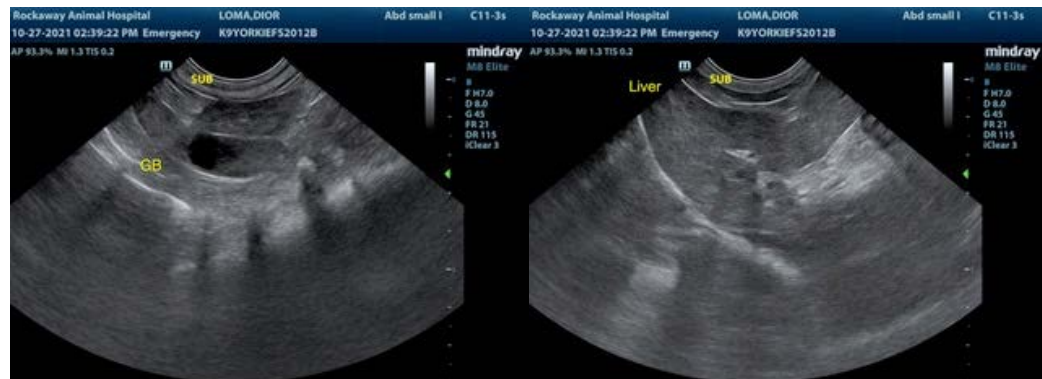
Dr. Maniar

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PATIENT

Dior Loma

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

SPECIES

Canine

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

BREED

Yorkie

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com

SEX

Spayed Female

AGE

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WEIGHT

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